

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**HCR Manor Care PAC**

Full Name (Last, First, Middle Initial)

**A. BILL NELSON FOR U S SENATE**

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE	State FL	Zip Code 32935
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Purpose of Disbursement  
Contribution for event held Wednesday, April 18th 2012

Candidate Name

**BILL NELSON**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		26		2012

**Transaction ID : SB23.34852**

Amount of Each Disbursement this Period

5000.00
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Full Name (Last, First, Middle Initial)

**B. BOB CASEY FOR SENATE INC**Mailing Address 700 13TH STREET NW  
SUITE 600

City WASHINGTON	State DC	Zip Code 20005
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Purpose of Disbursement  
Contribution for event held Friday, February 10th 2012

Candidate Name

**ROBERT P JR CASEY**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		03		2012

**Transaction ID : SB23.34816**

Amount of Each Disbursement this Period

2500.00
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Full Name (Last, First, Middle Initial)

**C. BRALEY FOR CONGRESS**

Mailing Address PO BOX 390

City WATERLOO	State IA	Zip Code 50704
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Purpose of Disbursement  
Contribution Requested 1-19-12

Candidate Name

**BRUCE L BRALEY**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2012

**Transaction ID : SB23.34807**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00
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